PART B - FEE(S) TRANSMITTAL

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CFR 1.3 CAddi Addi PTO	63). hange of correspondess form PTO/SB/1	ce address or indication of "I dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us	Correspondence	(1) the names of or agents OR, all (2) the name of registered attorn 2 registered pate	Peter Vogel 1 Peter Vogel 2 Artz & Artz, PC 2 Registered patent attorneys or agent) and the names of up to registered patent attorneys or agents. If no name is seted, no name will be printed.			
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